## Table 5A. Profile of Clients by Type of Funding Support

This table provides a summary of clients by Medicaid coverage. Since the focus of the reporting is on clients of the public mental health service

Please note that the same person may be served in both Medicaid and Non-Medicaid programs during the same reporting period.

Please note that the same	person in	ay be se	ived in both	Medicaic	and Noi	i-ivieuica	iu programi	s during ti	ie Same	reporting p	erioa.																		
Table 5A																													
Report Year:	SFY 2004																												
State Identifier:	Indiana																												
	Total				American Indian or Alaska Native			Asian			Black or African American			Native Hawaiian or Other Pacific Islander			White			Hispanic * use only if data for Table 5b are not available.				More Than One Race Reported			Race Not Available		
	Female	Male	Not Available	Total	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	Female	Male	Not Available	
Medicaid (only																												1	
Medicaid)	25885	22400	0	48285	93	93	0	57	54	0	3573	3954	0	2	10	0	21206	17177	0	0	0	0	427	597	0	527	515	0	
Non-Medicaid Sources (only)	15551	13240	0	28791	53	55	0	33	45	0	1557	1618	0	10	4	. 0	13416	10994	0	0	0	0	87	83	0	395	441	0	
People Served by Both Medicaid and Non- Medicaid Sources	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	) 0	0	0	0	) 0	0	0	0	0	0	0	
Medicaid Status Not Available	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Total Served	41436	35640	0	77076	146	148	0	90	99	0	5130	5572	0	12	14	0	34622	28171	0	0	0	0	514	680	0	922	956	0	

Data based on Medicaid Paid Services: N

Data Based on Medicaid Eligibility, not Medicaid Paid Services: Y

Data are Duplicated N

## Comments on Data:

<sup>\*</sup> Medicaid status determined by Medicaid Eligibility, not Medicaid paid services.

<sup>\*</sup> The reports shown on this website contain numbers for Indiana residents who are served by the Hoosier Assurance Plan (HAP) and do not contain numbers for all Indiana residents who may receive mental health or addiction services. The HAP is the main method by which the Indiana Division of Mental Health and Addiction can fund community mental health services. As established by the Indiana Legislature, the HAP is designed to support and manage the delivery of behavioral healthcare services to individuals who are in a low income population and who have clearly identified mental health needs.

<sup>\*</sup> This report currently contains data from the Community Services Data System (CSDS).

<sup>\*</sup> The reports span an entire fiscal year (7/1/XXXX - 6/30/XXXX).

<sup>\*</sup> Persons with a diagnosis of only substance abuse or mental retardation are not included in these reports. Therefore, persons with a co-occurring diagnosis of mental illness and substance abuse or mental retardation are included.

<sup>\*</sup> The results of this report were determined by placing consumers with a Medicaid ID number in the 'Medicaid Only' row, and consumers without a Medicaid ID number into the 'Non-Medicaid Only' row.